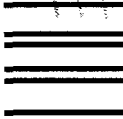


UNITED STATES POSTAL SERVICE



First-Class-Mail

Postage & Fees Paid

USP

Permit

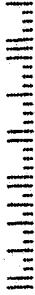


0000114690

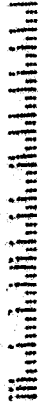
• Sender Please print your name, address, and ZIP+4 in this

RECEIVED

2001 AUG 15 ARIZONA CORPORATION COMMISSION
1200 W. Washington - Hrg. Div./Docket
AZ CORP COMMISSION
PHOENIX, Arizona 85007-2996
DOCUMENT CONTROL



85007/2996



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Sharon French
City of Safford Clerk
P. O. Box 272
Safford, AZ 85548

2. Article Number (Copy from service label)

7099 3400 0018 2489 6787

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

☒ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

L-00000038-01-0118

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes